

COPY

EXPRESS MAIL FILING LABEL NO. EL917371535US

**DECLARATION AND POWER
OF ATTORNEY FOR UTILITY
OR DESIGN
PATENT APPLICATION**

☐ Declaration ☒ Declaration
Submitted with Submitted after Initial
Initial Filing Filing (surcharge
37 CFR 1.16(e) required)

Attorney Docket No. INL-044

First Named Inventor Rosén

COMPLETE IF KNOWN

Application Serial Number 09/273,413

Filing Date March 19, 1999

Group Art Unit 1616

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IN VITRO METHODS, REAGENTS AND KITS FOR SCREENING FOR BLOOD COAGULATION DISORDERS

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on
(MM/DD/YYYY)

03/19/99

as United States Application Serial Number or PCT International

Application Number 09/273,413 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
98 105 043.8	Europe	3/19/98	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Serial Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application serial numbers are listed on a supplemental priority data sheet attached hereto.

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c), of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Serial Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label Here

Name	Registration Number	Name	Registration Number
Steven M. Bauer	31,481	Kurt W. Lockwood	40,704
Isabelle A.S. Blundell	43,321	Marianne McLaughlin	42,870
Michael H. Brodowski	41,640	Thomas C. Meyers	36,989
Jennifer A. Camacho	43,526	Joseph B. Milstein	42,897
Joseph A. Capraro, Jr.	36,471	Ronda P. Moore	44,244
Jerrie L. Chiu	41,670	Edmund R. Pitcher	27,829
John J. Cotter	38,116	Kurt Rauschenbach	40,137
Jennifer L. Dupre	41,722	Michael A. Rodriguez	41,274
John V. Forcier	42,545	Michael J. Schmelzer	43,093
Michael Giannetta	42,574	J. Scott Southworth	39,382
Duncan A. Greenhalgh	38,678	Christopher W. Stamos	35,370
William G. Guerin	41,047	Robert J. Tosti	35,393
Ira Heffan	41,059	Thomas A. Turano	35,722
Danielle L. Herritt	43,670	Michael J. Twomey	38,349
Elizabeth E. Kim	43,334	Christine C. Vito	39,061
Douglas J. Kline	35,574	Patrick R.H. Waller	41,418
John D. Lanza	40,060		
Timothy P. Linkkila	40,702		

☐ Additional registered practitioners named on supplemental Registered Practitioner Information sheet attached hereto.

Direct all correspondence to:

Patent Administrator
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110
Tel. No.: (617) 248-7000
Fax No.: (617) 248-7100

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Bert Steffen				Rosén					
Inventor's Signature		<i>Bert Steffen</i>			Date		June 1, 1999		
Street Address		Hallavägen 12			Citizenship		Sweden		
		City	Källered	State		Zip	S-428 37	Country	Sweden
Post Office Address		Hallavägen 12							
		City	Källered	State		Zip	S-428 37	Country	Sweden
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) attached hereto.									
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Christina Maria Yvonne				Hall					
Inventor's Signature		<i>Christina Maria Yvonne Hall</i>			Date		June 1, 1999		
Street Address		Apelrödsvägen 31			Citizenship		Sweden		
		City	Onsala	State		Zip	S-439 32	Country	Sweden
Post Office Address		Apelrödsvägen 31							
		City	Onsala	State		Zip	S-439 32	Country	Sweden
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature					Date				
Street Address					Citizenship				
		City		State		Zip		Country	
Post Office Address									
		City		State		Zip		Country	